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CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. DATE OF REPORT	2.a. NAME OF CA	ANDIDATE OR (COMMITTEE		
7/26/10	Everz	tt F	ajrek	ild Ca	mpzign
2.6 IF COMMITTEE. NAME OF CANDIDATE				3. ELECTION DATE	,
Everett Fair	child			8/05/	10
4 a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City		State	Zip Code	Phone
4704 Whispering Hills LN	HIX SO.	~ T	TN.	373 43	423-877-2750
4.b. CANOIDATE'S HOME ADDRESS (if differen Street or Rural Route	t than 4 a.) City		State	Zip Code	Phone
Same				<u></u>	
5. OFFICE SOUGHT (include district number, it				TREASURER (may be	candidate)
School Board Dista	ict 3	B	b F	"Leman	
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD OUARTER QUARTER QUARTER 8 a. BEGINNING DATE OF REPORTING PERIOD	FOURTH QUARTER	PRE-PRIMARY	PRE- GENERAL	MID-YEAR SUPPLEMENTAL DRITING PERIOD	YEAR-END SUPPLEMENTAL
2/04/10			24/10	DRINGFERIOD	
9 (Check one)	·		26/10		
 a. This campaign is exempt from detaile tures total \$1,000 or less for this repo b. This campaign is required to file a del and/or expenditures total more than \$ 	rting period. (Comp ailed financial disclo	elete items 12d isure because	., 12e. and 12f.)	·
10. I/we do solemnly swear or affirm that the in accurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we benefit of the candidate or for any other non Executive Taxable Additionally the Samulation of the Cambridge Taxable Additionally the Samulation of the Samula	ns and expenditure: swear or affirm that	s required to be no campaign of defined by the	e reported by it ontributions ha	ie candidate committed ve been expended for	by the Campaign
signature of candidate	date	_	signature (of political treasurer	date
11 WITNESS SIGNATURE	··		·	<u>.</u>	
Charlotte Mullis Marga	7-29-10	_	· •		
signature of withess	date		signa	iture of witness	date
12 SUMMARY			_	*	
a BALANCE ON HAND LAST REPORT	··			.s	
b TOTAL RECEIPTS THIS PERIOD				s 3461. 3	
c. TOTAL DISBURSEMENTS THIS PERIOD .				3 2095.	
d 8ALANCE ON HAND (12 a. plus 12.b. m	inus 12 c.)				1366,23
e TOTALLOANS OUTSTANDING	JS : II KA	10 JUL 29	02 50		300
F TOTAL CALIGATIONS OUTSTANDING	NOISSI NOISSI	WWOO SELE			300

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	,			RING THE PERIOD
		F	ROM: 2/4/10	TO: 7/24/10
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)				
a. Unitemized Contributions (\$100 or less from each source this	period) .	\$	780 -	
b. Itemized Contributions (over \$100 from each source this perio	d)	\$	2381.76	
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add	15.a. an	nd 15.b.)		\$ 3141.76
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ 300,00			
17. INTEREST RECEIVED THIS REPORTING PERIOD			·····	\$ <u> </u>
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in it	em 12.b	.)		s <u>3461,76</u>
DISBURSEMENTS				
19. EXPENDITURES (other than loan payments)				
a. Expenditures (\$100 or less each payee this period) (must be list	ed by ca	itegory - e.g.,	printing, postage, g	asoline)
u.s. Postal Service	\$_	88.00	7051096	
Staples	\$_4	80.30	Printin	4
Lowes	\$ 4	68,15	plywood	4 Posts
HIXSON High Sports Boosters	\$ 4	100.00	Adden	, , ,
Felowship of Christian Peace Off.		100 50	Adver E'	31.79
Lowes	_	022	2004s 5	or 3175
Lowes	•	0 > 0	rable t	יים ב איני יושל בשיו
LOWES		44 24	Plywood	4 1
Suntrust	\$	19.75	Print C	hecks
Total of Companyity and (the OD and Law)			~10 60	
Total of Expenditures (\$100 or less each payee)				
b. Itemized Expenditures (Over \$100 each payee this period)			1576.50	
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a				
20. LOAN REPAYMENTS MADE THIS PERIOD				
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown i	n item 1	2.c.)		\$ 2095, 53
22.IN-KIND CONTRIBUTIONS				
a. Unitemized in-kind contributions (\$100 or less from each source			40	
 b. Itemized in-kind contributions (over \$100 from each source this p 	•	•	<u> </u>	
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (a	dd 22.a.	. and 22.b.)		\$ 600
23. OBLIGATIONS				
a. Uniternized Obligations Outstanding (\$100 or less each)				
b. Itemized Obligations Outstanding (Over \$100 each)	····	\$	300 -	_
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (mu	st be sh	own i item 12	2.f.)	\$ 300 =



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	hild Campa	1(5 n	2. REPORT COVER	TO: 7/26/10					
	Amount								
TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page) COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)									
First Name Phy /// S	Middle Name	Contribution Received For:	TWO TRAIT GITY CONTINUES.	Amount of Contribution					
Last Name/Organization Name Last Name/Organization Name		Primary Election	General Election	\$150					
Address 110 N. Dant mo	uth st.	Runoff (Local Election	s Only)						
Chattanooga				Aggregate This Election					
Occupation COMMETON		4/5/10	•	1150					
Employer Hamilton Count	y Schools								
First Name Everett	Middle Name	Contribution Received For		Amount of Contribution					
Last Name/Organization Name Fair Child		Primary Election C	General Election	\$581.76					
Address 4704 Whisperin	Runoff (Local Election	ns Only)							
City HIXSON	State Zip Code 37443	Date of Contribution		Aggregate This Election					
Occupation Refined Educe Employer	g yar			\$581.76					
First Name David	Middle Name	Contribution Received For		Amount of Contribution					
Last Name/Organization Name Lawrence	N.	☐ Primary Election [General Election	\$ 150 00					
Address 710 N. Dantmon	ett st.	Runoff (Local Election	ns Only)	/30					
Chattanooga	State Zip Code TN 37405	Date of Contribution		Aggregate This Election					
Occupation	1	1		150					
Chattanooga 57	tate								
First Name Day	Middle Name	Contribution Received For:	<u> </u>	Amount of Contribution					
Last Name Organization Name	☐ Primary Election ☐	General Election	4500 00						
Address 3000 Hamill	Runoff (Local Election	ns Only)							
	アル サッティ3	Date of Contribution	<u></u>	Aggregate This Election					
Occupation Health Facility Employer	Developer	6/13/10		1500					
5e/5									
TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages (If this is the last page of contributions, this amount must	r			1381.76					

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1 NAME OF CANDIDATE OR COMMIT	I E E	. 4	,	2 REPORT COVE	ERING THE PERIOD				
I NAME OF CANCIDATE OR COMMIT EVERETT Fai	rahi	12 Ca	mPalgn	FROM:	TO:				
3. TOTAL ITEMIZED CAMPAIGN CONT			-	page)	Argount 76				
4 COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)									
First frame	Middle N	àme	Contribution Received For	Contribution Received For:					
Cast Name Conjunction Name HPACE			Primary Election	Primary Election General Election					
4dress 4655 5 hall	ow for	- d Rd	Runoff (Local Electi	Runoff (Local Elections Only)					
Chattarooga	TN	Zp Code 374//	Date of Contribution		Aggregate This Electron				
Cocupation		. <u></u>	7/12/1	7/12/10					
Employer			\dashv 、						
Hamilton County	Educa	tion Ass	ocietion						
First Name ◀	Widdle N	ame	Contribution Received F	or:	Amount of Contribution				
East Namer Organization Name	·-·· · · · · · · · · · · · · · · · · ·		Primary Election	General Election					
Address	·		Runoff (Local Electi	ions Only)					
City	State	Zip Code	Date of Contribution		Aggregate This Election				
Occupation									
Employer		·							
First Name	Middle Na	erne	Contribution Received Fo	Contribution Received For:					
Last Name/Organization Name			Primary Flortion	Primary Election General Election					
			2 1 Timary Election	done di ciccoon					
Audress			Runoff (Local Election	_					
	Stane	Z p Code		_	Aggregate This Electron				
Address Oily	State	Ž p Code	Runoff (Local Electr	_	Aggregate This Election				
Address Uity Conceation	Stane	Z p Code	Runoff (Local Electr	_	Aggregate This Election				
Address Oily	State	Z-p Code	Runoff (Local Electr	_	Aggregate This Election				
Address Uity Conceation	State Viddle Va		Runoff (Local Electr	ans Only)	Aggregate This Election				
Address Oity Occupation Employer			Date of Contribution Contribution Received For	ans Only)					
Address Oity Coducation Employer In its Name			Date of Contribution Contribution Received For	ons Only) General Election					
Address Oby Conduction Employer First Name Last Name Organization Name			Date of Contribution Contribution Received For	ons Only) General Election					
Address Oby Conduction Employer First Name Last Name Organization Name	Middle *ta	irre	Contribution Received For Primary Electron	ons Only) General Election	Amount of Contribution				
Address Concellon Employer First Name Last Name Organization Name Address Dity	Middle *ta	irre	Contribution Received For Primary Electron	ons Only) General Election	Amount of Contribution				
Address Coccetion Employer First Name Last Name Organization Name Address Tity Locuration	Middle *ta	irre	Contribution Received For Primary Electron	ons Only) General Election	Amount of Contribution				
Address Cocceation Employer First Name Last Name Organization Name Address Dity Journation	Middle ha	Elp Code	Contribution Received For Primary Electron	ons Only) General Election	Amount of Contribution				

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COM	WITTEE				RING THE PERIOD		
1. NAME OF CANDIDATE OR COM	urchild	[ampa	19n	FROM:	TO:		
		-			Amount		
3. TOTAL ITEMIZED IN-KIND CONT				•			
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)							
First Name	ame	In-Kind Contribution Receive	d For:	Value of In-Kind Contribution			
Last Name/Organization Name	I		Primary Election	Primary Election General Election			
Billy T and Tom Signs			Runoff (Local Election	Runoff (Local Elections Only)			
Last Name/Organization Name Billy Fand Tom Signs Address 5228 HIXSON Pilce			Date of In-Kind Contribution	Date of In-Kind Contribution 4/5/16			
City HIX50N SPEN ZigCook343			Description of In-Kind Contribution 2 - 4 x 8 5 4 - 2 x 4 5 f	I q ns			
Occupation Advertising	Employer		11- 284 51	9115			
Advertising			7				
First Name	Middle Na	ame	In-Kind Contribution Receive	ed For:	Value of In-Kind Contribution		
				General Election	Value of Infixing Continuing		
Last Name/Organization Name			Runoff (Local Electio	ns Only)			
Address			Date of In-Kind Contribution		Aggregate this Election		
City	State	Zip Code	Description of In-Kind Contribution	"	<u></u>		
Occupation	Employer		+				
'							
First Name Middle Name			In-Kind Contribution Receive	_	Value of In-Kind Contribution		
Last Name/Organization Name			Primary Election	General Election			
			Runoff (Local Election	ns Only)			
Address			Date of In-Kind Contribution		Aggregate this Election		
City	State	Zip Code	Description of In-Kind Contribution				
Occupation	Employer		-				
			<u> </u>				
First Name	Middle Na	ame	In-Kind Contribution Receive		Value of In-Kind Contribution		
Last Name/Organization Name	· · · · · · · · · · · · · · · · · · ·	·	i _	General Election			
	 .		Runoff (Local Election	ns Only)			
Address			Date of In-Kind Contribution		Aggregate this Election		
City	State	Zip Code	Description of In-Kind Contribution		·		
Occupation	Employer		7				
First Name	Middle Nar	me	In-Kind Contribution Receive	ed For	Value of In-Kind Contribution		
Lawyer 10 F				General Election	Aside of III-Land Countilofillou		
Last Name/Organization Name			Runoff (Local Election	is Only)			
Address	· · · · · · · · · · · · · · · · · · ·	· · · · · ·	Date of In-Kind Contribution		Anarpagia His Classic		
-					Aggregate this Election		
City	State	Zip Code	Description of In-Kind Contribution				
Occupation	employer	 -	†				
				<u> </u>			
5. TOTAL ITEMIZED IN-KIND CONT (Carry forward to item 3, of next page if additional)	tional pages of this form	are used.)			\$ 600 P		
(If this is the last page of in-kind contribution	s, this amount must be s	hown in item 22b, of summa	γ.)				

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Exerct Fair child Campain 2. REPORT COVERING THE PERIOD FROM: 2/04/10 TO: 7/26/10									
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	Amount								
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)									
First Name	Middle Nan		Purpose of Expenditure		Amount of Expenditure				
Last Name/Business Name Billy and Tom	519.	n ª	519n5		\$581.76				
Address 5228 HIXSON P, ICE City HIXSON TX State Zip Code TX 37343			•		7387.76				
CH HIX SOK	State	Zip Code 373 ← 3							
First Name	Middle Nan		Purpose of Expenditure		Amount of Expenditure				
Last Name/Business Name									
Address 5228 HIX50N	D. L	21945	519 ms 4	nd Stakes	4394.80				
City HIXSON	State TN	Zip Code 373 43							
First Name	Middle Nan		Purpose of Expenditure		Amount of Expenditure				
Last Name/Business Name Chattanooya Times	e Press	Advertion	ing	600.00					
400 E 11th				600.					
Address 400 E 11th City Chattanooga	State TA	37# 03							
First Name	Middle Nam		Purpose of Expenditure		Amount of Expenditure				
Last Name/Business Name		14-							
Address		.							
City	State	Zip Code							
First Name	Middle Nam		Burness of Europediture		45 11				
Last Name/Business Name	Middle Nan		Purpose of Expenditure		Amount of Expenditure				
Address									
City	State	Zip Code							
First Name	Middle Nam	e	Purpose of Expenditure	·· -	Amount of Expenditure				
Last Name/Business Name	<u> </u>								
Address									
City	State	Zip Code							
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3, of next page if additional pages) (If this is the last page of expenditures, this amount mus					\$157656				

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR C			,					REPORT C	OVER	ING THE PERIOD
3. COMPLETE THE APPROPRIA							ス	104/1	0	10:7/26/10
		- CR EACH I	I EIVIIZ	LED LOAN	loans tolaling r	nore than \$10	o from any source	during the per	iod)	
Complete the Following for the Source First Name	e of the Loan Middle Nai			Outstanding	Loan Balance	Loans	<u> </u>	.oan	Oute	tanding Loan Balance
Everett	Everett R (Begi			(Beginning	g of Period) Received Payments (End of Pe					(End of Period)
East Name/Organization Name Fairchild					201:00				£300 00	
Address 4704 Whisper City HIX SO 4	rugi	Hells L	. 4	Loan Receiv		Ø -€enera	I Election	Date of Load	1/10	- 100-
City HIX SO 4					(Local Elections		<u></u>		//8	
	List All Endo	_		or Above Loa		ice is neede	d please attach	a page)		
First Name		Middle Name			First Name				Middle	Name
Last Name/Organization Name					Last Name/Or	ganization Na	me	* 1	<u> </u>	
Address				, ,	Address					,
City		State	Zip C	ode	City		, 		State	Zip Code
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding					
First Name *	. ,	Middle Name	!		First Name Middle Name					Name
Last Name/Organization Name	,			,	Last Name/Or	ganization Nat	me			
Address		• •			Address					· <u> </u>
City		State	Zip O	ode	City		·- ··		State	Zip Code
Amount Guaranteed Outstanding					Amount Guara	inteed Outstan	ding	~~~		-·
First Name	•	Middle Name	!		First Name		· ''		Middle	e Name
Last Name/Organization Name				•	Last Name/Or	ganization Na	me		1	
Address					Address	· • •				
City		State	Zip C	ode	City	<u> </u>	<u>.</u>		State	Zip Code
Amount Guaranteed Outstanding			•		Amount Guara	inteed Outstan	ding			
First Name		Middle Name			First Name			•	Middle	Name
Last Name/Organization Name		_1			Last Name/Organization Name					
Address					Address					
City		State	Zip C	ode	City		<u> </u>		State	Zip Code
Amount Guaranteed Outstanding					Amount Guara	nteed Outstan	ding		•	<u>.</u> .
Totals for all Loans (complete or (Total loans received should also be show (Total loans received should also be show)	n in item 16. on	summary page.)			Outstanding Le (Beginning		Loans Received	Loa Paym		Outstanding Loan Balance (End of Period)
(Total loan payments should also be show (Total outstanding loan balance should also					0	<u> </u>	300	0		1300
SS-1132 (Rev. 4/02)						F	age <u>7</u>	of 🙎		RDA 1159



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE EVERCET FAIRCH		2. REPORT COVERING THE PERIOD				
3. COMPLETE THE APPROPRIATE ITEMS F	OREACH	LE AMP	Outstanding Balance	FROM: 2/4/		126/10
OBLIGATION (obligations totaling more tha	n \$100 ow	ed to any	(Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
person/vendor at the end of the reporting p	eriod)	•	, , , , , , , , , , , , , , , , , , , ,		THIS I CHOO	(Elia or reliad)
First Name	Middle Na	me				
Everett	2	ζ	1	00		00
ast Name/Business Name			0	300°°	0	30000
Fairehild Address 4704 Whispering Hills LN			<u> </u>			
	State	Zin Corto	4			
City # 1 X50 K	TH	Zip Code 37343				
Description of Obligation		-1. .		<u></u>	<u> </u>	
First Name	Middle Nar	me			···· <u>·</u> .	
Last Name/Business Name	<u> </u>		-			
Address						
Oity	State	Zip Code	†			
Description of Obligation			<u> </u>			
First Name	Middle Nar	ne				
Last Name/Business Name			-			
		···.	_			
Address					:	
City	State	Zip Code	†			
Description of Obligation	1	<u> </u>	<u> </u>		<u> </u>	
First Name	Middle Nar	TI e				
Last Name/Business Name			-			
Address]			
City	State	Zip Code	1			
Description of Obligation	l		1			
Distribution Congation						
First Name	Middle Nar	ne				
Lost Name Plusiness Name						1
Last Name/Business Name						
Address		.,	1			
City	State	Zip Code	1			
Description of Obligation			<u> </u>			
4. TOTALS					ï	1 -
(Total from Outstanding Balance - (End of Period) of in item 23b. on summary page.)	olumn must	talso be shown				300 00
an item 200. On summery page.			<u> </u>			